1	10A NCAC 13P .0301 is proposed for amendment as follows:	
2		
3	10A NCAC 13	P .0301 SPECIALTY CARE TRANSPORT PROGRAM CRITERIA
4	(a) Programs I	EMS Providers seeking designation to provide specialty care transports shall submit an application for
5	program appro	val to the OEMS at least 60 days prior to field implementation. The application shall document that
6	the program ha	s:
7	(1)	a defined service area; area that identifies the specific transferring and receiving facilities in which
8		the program is intended to service;
9	(2)	a written policies and procedures implemented for medical oversight plan meeting the
10		requirements of Section .0400;
11	(3)	service continuously available on a 24 hour per day basis;
12	(4)	the capability to provide the following patient care skills and procedures:
13		(A) advanced airway techniques including rapid sequence induction, cricothyrotomy, and
14		ventilator management, including continuous monitoring of the patient's oxygenation;
15		(B) insertion of femoral lines;
16		(C) maintaining invasive monitoring medical devices to include such as central venous
17		pressure lines, arterial and venous catheters, arterial lines, intra-ventricular catheters, and
18		epidural catheters; and
19		(D) interpreting 12-lead electrocardiograms;
20	(5)	a written continuing education plan program for EMS personnel, under the direction of the
21		Specialty Care Transport Program Continuing Education Coordinator, developed and modified
22		based on feedback from program data, review and evaluation of patient outcomes, and quality
23		management reviews. review that follows the guidelines of the:
24		(A) "US DOT NHTSA EMT-Basic Refresher: National Standard Curriculum" for EMT
25		personnel; and
26		(B) "EMT-P and EMT-I Continuing Education National Guidelines" for EMT-I and EMT-P
27		personnel.
28		These documents are incorporated by reference in accordance with G.S. 150B-21.6, including
29		subsequent amendments and additions. These documents are available from NHTSA, 400 7th
30		Street, SW, Washington, D.C. 20590, at no cost;
31	(6)	a mechanism to collect and electronically submit to the OEMS data that uses the EMS data set and
32		data dictionary as specified in "North Carolina College of Emergency Physicians: Standards for
33		Medical Oversight and Data Collection," incorporated by reference in accordance with G.S. 150B-
34		21.6, including subsequent amendments and editions. This document is available from the OEMS,
35		2707 Mail Service Center, Raleigh, North Carolina 27699 2707, at no cost. EMS Specialty Care
36		Transport Programs shall comply with this requirement by July 1, 2004. a communication system
37		that will provide two-way voice communications for transmission of patient information to

I		medical crew members anywhere in the service area of the program. The SCTP medical director
2		shall verify that the communications system is satisfactory for on-line medical direction;
3	<u>(7)</u>	medical crew members that have all completed training regarding:
4		(A) operation of the EMS communications system used in the program; and
5		(B) the medical and safety equipment specific to the vehicles used in the program. This
6		training shall be conducted every six months;
7	<u>(8)</u>	written operational protocols for the management of equipment, supplies and medications. These
8		protocols include:
9		(A) a listing of all standard medical equipment, supplies, and medications for all vehicles
10		used in the program based on the treatment protocols and approved by the medical
11		director;
12		(B) a methodology to assure that each vehicle contains the required equipment, supplies and
13		medications on each response; and
14	(9)	written policies and procedures specifying how EMS Systems will dispatch and utilize the
15		ambulances operated by the program.
16	(b) Application	ns for specialty care transport program approval shall document that the applicant meets the
17	requirements fo	r the specific program type or types applied for as specified in Rules .0302, .0303 or .0304 of this
18	Section. When	transporting patients, staffing for the vehicle used in the SCTP shall be approved by the SCTP
19	medical director	as medical crew members, using any of the following appropriate for the condition of the patient:
20	<u>(1)</u>	EMT-Paramedic;
21	<u>(2)</u>	nurse practitioner;
22	<u>(3)</u>	physician;
23	<u>(4)</u>	physician assistant;
24	<u>(5)</u>	registered nurse; and
25	<u>(6)</u>	respiratory therapist.
26	(c) EMS Provi	ders whose primary dedicated service is the provision of the patient care skills and procedures as
27	detailed in Para	graph (a)(4) of this Rule are exempt from the staffing requirements defined in G.S. 131E-158(a).
28	(e) (d) Specialt	y care transport program <u>Care Transport Program</u> approval shall be <u>are</u> valid for a period to coincide
29	with the EMS P	rovider License, not to exceed six years. Programs shall apply to the OEMS for reapproval.
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31	History Note:	Authority G.S. <u>131E-158;</u> 143-508(d)(1), (d)(8), (d)(9); 143-508(d)(13);
32		Temporary Adoption Eff. January 1, 2002;
33		Eff. January 1, 2004;
34		Amended Eff. January 1, 2009.